

## **CITY OF LAS VEGAS DEPARTMENT OF BUILDING & SAFETY PERMIT APPLICATION**

## **BAR CODE HERE**

## TYPE OR PRINT (BLACK INK ONLY)

| Project #                     |  |               | Parent Project #           |                                |  |  |
|-------------------------------|--|---------------|----------------------------|--------------------------------|--|--|
| FOR:<br>WORK                  | ☐ Commercial & Public Structures                           |               | ☐ Single Famil             |                                |  |  |
| PERMITS REQUESTED:            |  |               | ☐ Mechanical Val           |                                |  |  |
|                               | ☐ Plumbing Va  | l             |                            | ☐ Electrical Val               |  |  |
| TOTAL                         | _ VALUATION: \$  |               |                            |                                |  |  |
| ADDRI                         | ESS:   |               |                            |                                | ZIP                                      |  |
| OWNE                          | R/BUILDER NAME:  |               |                            |                                |  |  |
|                               | RACTOR:  |               |                            |                                |  |  |
| PROJE                         | ECT/BUSINESS NAME:   |               |                            |                                |  |  |
| CONT                          | ACT PHONE NO.:   |               |                            | CONTACT FAX NO.:               |  |  |
| STATE CONTRACTOR LICENSE NO.: |  |               | CITY BUSINESS LICENSE NO.: |                                |  |  |
| PARCI                         | EL NO.:  |               |                            | ZON                            | ≣:                                       |  |
| LOT(s)                        | : BLOCK:   | <del></del>   | SUBDIVISION:               |                                |  |  |
| OCCUPANCY GROUP: USE:         |  |               | CONST. TYPE:               |                                |  |  |
| SQUAI                         | RE FT OF FLOOR AREAS: 1st                                  |               | 2 <sup>nd</sup>            | 3 <sup>rd</sup>                | Garage                                   |  |
|                               | Patio Balcony  |               | Total                      | No. of Units                   | No. of Stories                           |  |
| SPECI                         | AL CONDITIONS:   |               |                            |                                |  |  |
|                               | hat the information I have supplied on this n this permit. | s application | on is true and correc      | t. By signing this application | I agree to comply with all conditions as |  |
| Contra                        | ctor or Agent / Owner                                      | Date          |                            | Planning Department            | Date                                     |  |
| Land D                        | Development/Flood Control Engr.                            | Date          |                            | Fire Department                | Date                                     |  |
| Building Department Date      |  |               | TOTAL PERMIT FEE: \$       |                                |  |  |
|                               | PAID: Plan Review \$ PAID: Zoning \$                       |               |                            |                                | oires 180 Days After<br>onment of Work   |  |
|                               | TOTAL \$   |               |                            |                                | nspection has been requested for a       |  |

180-day period after the permit has been issued.